

01/30/01

PTO  
09/17/1992

01/30/01

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

for new nonprovisional applications under 37 CFR 1.53(b)

Attorney Docket No.

9506-004-27

First Inventor or Application Identifier

Joseph SIEGRIST

Title

REMOTE MEDIA CONTROL FOR VOICE OVER INTERNET TELEPHONY  
AND RELATED APPLICATIONS**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)  
(Submit an original and a duplicate for fee processing)  
☒ Applicant claims small entity status.
2. ☒ Specification Total Pages **16**
3. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets **6**
4. ☒ Oath or Declaration Total Pages **3**  
a. ☒ Newly executed (original or copy)  
b. ☐ Copy from a prior application (37 C.F.R. §1.63(d))  
(for continuation/divisional with box 15 completed)
5. ☐ Incorporation By Reference (usable if box 4B is checked)  
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4B, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231**ACCOMPANYING DOCUMENTS**

6. ☒ Assignment Papers (cover sheet & document(s))
7. ☐ 37 C.F.R. §3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
8. ☐ English Translation Document (if applicable)
9. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
10. ☐ Preliminary Amendment
11. ☒ White Advance Serial No. Postcard
12. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
13. ☐ Request for Priority
14. ☐ List of Inventors' Names and Addresses
15. ☐ Other:

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

- ☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.:  
Prior application information: Examiner: Group Art Unit:

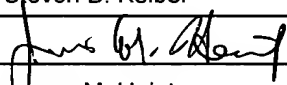
17. Amend the specification by inserting before the first line the sentence:

- ☒ This application is a ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)  
of application Serial No. Filed on

- ☐ This application claims priority of provisional application Serial No. Filed

**18. CORRESPONDENCE ADDRESS**

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Name	Steven B. Kelber	Registration No.	30,073
Signature		Date	1/30/00
Name	James M. Heintz	Registration No.	41,828

Telephone 202-861-3900

# FEE TRANSMITTAL

Docket No. 9506-004-27  
 Serial No. New Application  
 Filing Date Herewith  
 Inventor(s) Joseph SIEGRIST et al.  
 Group Art Unit

TOTAL AMOUNT OF PAYMENT \$395.00

Examiner

1c970 U.S. PTO  
 09/17/1992



1. ☒ Applicant claims small entity status.

☐ Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442.

☐ Charge the indicated fees to Deposit Account No. 50-1442.

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid											
Fee Code	Fee (\$)	Fee Code	Fee (\$)													
105	130	205	65	Surcharge-late filing fee or oath												
127	50	227	25	Surcharge-late provisional filing fee or cover sheet												
139	130	139	130	Non-English specification												
147	2520	147	2520	Ex parte reexam. fee												
101	710	201	355	Utility filing fee	\$355.00											
106	320	206	160	Design filing fee												
107	490	207	245	Plant filing fee												
108	710	208	355	Reissue filing fee												
114	150	214	75	Provisional filing fee												
SUBTOTAL (1)				\$355.00												
120				310	220	155	Appeal Brief									
tot. claims 20				-	20*	=	0	x \$9	=	0	121	270	221	135	Request for Oral Hearing	
ind. claims 3				-	3*	=	0	x \$40	=	0	142	1240	242	620	Utility/Reissue Issue Fee	
<input type="checkbox"/> Multiple Dependent Claims				\$135	=						143	440	243	220	Design Issue Fee	
Large Entity				Small Entity		Fee Description					144	600	244	300	Plant Issue Fee	
Fee Code	Fee (\$)	Fee Code	Fee (\$)								122	130	122	130	Petitions to the Commissioner	
103	180	203	9	Claims in excess of 20							126	180	126	180	IDS Submission	
102	80	202	40	Independent claims in excess of 3							581	40	581	40	Assignment	\$40.00
104	270	204	135	Multiple dependent claim, if not paid							179	710	279	355	For Filing RCE	
109	80	209	40	*Reissue independent claims over original patent							169	900	169	900	Expedited Design	
110	18	210	9	*Reissue claims in excess of 20 and over original patent				OTHER (indicate below):								
SUBTOTAL (2)				\$0.00												
* or number previously paid, if greater; For Reissues, see above								SUBTOTAL (3)				\$40.00				

2. ☒ Check enclosed.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		

101	710	201	355	Utility filing fee	\$355.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)				\$355.00	

101	710	201	355	Utility filing fee	\$355.00
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108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)				\$355.00	

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108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)				\$355.00	

### 2. EXTRA CLAIM FEES

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
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tot. claims	20	-	20*	=	0	x	\$9	=	0
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<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
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tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

tot. claims	20	-	20*	=	0	x	\$9	=	0
ind. claims	3	-	3*	=	0	x	\$40	=	0
<input type="checkbox"/> Multiple Dependent Claims				\$135	=				

Name Steven B. Kelber

Signature

*James M. Heintz*

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30,073

Date

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